## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docke: Number 10780699

CLAIMS AS FILED - PAH I						ımn 2)		SMALL ENTITY TYPE			OTHER THAN OF SMALL ENTITY		
TOTAL CLAIMS			DK					RATE	FEE	٦ ٦	RATE	FEE	
FOR .			NUMBER FILED		NUME	IBER EXTRA		BASIC FEE	<del>                                      </del>	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			23 minus 20=		. 3			XS 9=		OR	X\$18=	54	
INDEPENDENT CLAIMS			) minus 3 =		8			X43=		OR	X86=		
MULTIPLE DEPENDENT CLAIM PRESENT								-145=	-	OR	-290=	290	
* If the difference in column 1 is less than zero, enter "0" in column 2							į	TOTAL		OR	TOTAL	270	
H.H.D7 CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								TOTAL	L	JOH	OTHER	THAN	
4	.4.07	100,01	27	(Column 3)		SMALL	ENTITY	OR	SMALL				
AMENDMENT A	·	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID I	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
N N	Total .	. 5	Minus	*		=		X\$ 9=		OR	X\$18=		
AME	Independent	· /	Minus	1		-		X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						[	+145=		OR	+290=		
•								TOTAL NDDIT, FEE		OR	TOTAL ADDIT: FEE		
		·											
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID I	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	_ ••		= ·		XS 9=	·	OR	X\$18=		
	Incependent	•	Minus	***		2		X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							45			. 200		
	,						L	+145=		OR	+290= TOTAL		
•	•						A	DOIT FEE		OR ,	ADDIT. FEE		
7	`	(Column 1) CLAIMS		(Colum	<u></u>	(Column 3)		. · ·					
AMENDMENT C		REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		=	Γ	X\$ 9=		OR	X\$18=		
	Independent	•	Minus	***		=	r	X43≖		ı	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR			
• 11	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								·	OR	+290=		
**	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR ,	TOTAL ODIT. FEE	·	
• 1	he "Highest Num	ber Previously Paid	For (Total or	Independer	nt) is the i	highest number	toun	d in the appr	opriate box	ın colu	ımn 1.		